

E-filing

COMPLAINT BY A PRISONER UNDER THE  
CIVIL RIGHTS ACT 42 U.S.C. 1983.NAME WEAVER WILLIE *(JW)*  
(LAST) (FIRST) (INITIAL)PRISONER NUMBER J-91389INSTITUTION ADDRESS PELICAN BAY STATE  
PRISON P.O. BOX 7000 CRESCEENT CITYCA. 95531 UNITED STATES DISTRICT COURT  
NORTHERN DISTRICT OF CALIFORNIAWILLIE WEAVER  
(ENTER THE FULL NAME OF  
PLAINTIFF IN THIS ACTION)  
FIRSTWATCH, WARDEN,  
ASSIT WARDEN, CAPTAIN  
LIEUTENANT, SERGEANT  
CORRECTIONAL OFFICERS  
IN MATES ON 03/25/08  
(ENTER THE FULL NAME  
OF DEFENDANT(S) IN THIS ACTION)CASE NO.  
(TO BE PROVIDED  
BY THE CLERK OF  
COURT)COMPLAINT UNDER  
THE CIVIL RIGHTS  
ACT 42 U.S.C. 1983(ALL QUESTIONS ON THIS COMPLAINT FORM  
MUST BE ANSWERED IN ORDER FOR YOUR  
ACTION TO PROCEED . . .)EXHAUSTION OF ADMINISTRATIVE REMEDIES  
NOTE: YOU MUST EXHAUST YOUR ADMINI-  
STRATIVE REMEDIES BEFORE CLAIM CAN  
GO FORWARD, THE COURT WILL DISMISS  
ANY UNEXHAUSTED CLAIMS)

A. PLACE OF PRESENT CONFINEMENT PS-4

B. IS THERE A GRIEVANCE PROCEDURE IN  
THIS INSTITUTION? YES  NO

C. DID YOU PRESENT THE FACTS IN YOUR  
COMPLAINT FOR REVIEW THROUGH THE  
GRIEVANCE PROCEDURE? YES  NO

D. IF YOUR ANSWER IS YES, LIST THE  
APPEAL NUMBER AND THE DATE  
AND RESULT OF THE

COMPLAINT

- 1 -

APPEAL AT EACH LEVEL OF REVIEW, IF YOU  
did NOT PURSUE A CERTAIN LEVEL OF  
APPEAL EXPLAIN WHY.

1. INFORMAL APPEAL \_\_\_\_\_

2. FIRST FORMAL LEVEL \_\_\_\_\_

3. SECOND FORMAL LEVEL \_\_\_\_\_

E. IS THE LAST LEVEL TO WHICH YOU  
APPEALED THE HIGHEST LEVEL OF  
APPEAL AVAILABLE TO YOU?  
YES ( ) NO (✓)

F. IF YOU DID NOT PRESENT YOUR CLAIM  
FOR REVIEW THROUGH THE GRIEVANCE  
PROCEDURE.

EXPLAIN WHY. STILL BEING  
PROCESSED

II. PARTIES

A. WRITE YOUR NAME AND YOUR PRESENT  
ADDRESS, DO THE SAME FOR ADDITIONAL  
PLAINTIFFS, IF ANY. WILLIE WEAVER  
PELICAN BAY STATE PRISON P.O. Box

7000 CRESCENT CITY, CA. 95531

B. WRITE THE FULL NAME OF EACH  
DEFENDANT HIS OR HER OFFICIAL  
POSITION, AND HIS OR HER PLACE  
OF EMPLOYMENT.

PELICAN Bay STATE PRISON P.O. Box

7000 CRESCENT CITY, CA. 95531

FIRST WATCH, WARDEN, ASSIST WARDEN,  
CAPTAIN, LIEUTENANT, SERGEANT,  
CORRECTIONAL OFFICERS, INMATES  
ON 03/25/08 FIRST WATCH

COMPLAINT

- 2 -

STATEMENT OF CLAIM

STATE HERE AS BRIEFLY AS POSSIBLE THE FACTS OF YOUR CASE. BE SURE TO DESCRIBE HOW EACH DEFENDANT IS INVOLVED AND HOW TO INCLUDE DATES, WHEN POSSIBLE DO NOT GIVE ANY LEGAL ARGUMENTS OR CITE ANY CASES OR STATUTES, IF YOU HAVE MORE THAN ONE CLAIM EACH CLAIM SHOULD BE SET FORTH IN A SEPARATE NUMBERED PARAGRAPH.

ON FIRST WATCH 03/25/08 PLAINTIFF IS BEING WOKEN OF SLEEP DEPRIVATION FROM DEFENDANT(S) IN CONSPIRACY WITH MEDICAL, INMATES, HIS NEIGHBOR'S IN CELL 211, 111, 110, 209, 208, 207, 206, 204, 203, PLAINTIFF IS BEING WOKEN FROM SLEEP DEPRIVATION FROM SENSORY DEVICE MACHINE THESE ARE WITNESSES THAT ARE HAVING THE SAME PROBLEMS

JOHN RABE D-58062, CARLOS LUTZ, MONTELLO, WILLOCK DEFENDANT(S) SHOWED DELIBERATE INDIFFERENCE UNDER THE EIGHT AMENDMENT THAT CONSTITUTE CRUEL AND UNUSUAL PUNISHMENT. YOUR COMPLAINT CANNOT GO FORWARD UNLESS YOU REQUEST SPECIFIC RELIEF. STATE BRIEFLY EXACTLY WHAT YOU WANT ARE THE COURT TO DO FOR YOU. MAKE NO LEGAL ARGUMENTS; CITE NO CASES OR STATUTES.

LIABILITY DAMAGES: 50,000 FIFTY THOUSAND DOLLARS DUE TO: HARRASSMENT(S), THREATENING, CONSPIRACY, UNITED STATES CONSTITUTION VIOLATION PUNITIVE DAMAGES: 50,000 FIFTY THOUSAND DOLLARS DUE TO: MENTAL ANGUISH, STRESS DISORDER,

I DECLARE UNDER PENALTY OF PERJURY THAT THE FORGOING IS TRUE AND CORRECT  
SIGNED this 03 day of 25 20 08  
COMPLAINT -3-

WILLIE WEAVER  
Case 5:08-cv-01845-JW

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PELICAN BAY STATE  
PRISON P.O. Box 7000  
CRESCENT CITY, CA.

95531.

PELICAN BAY STATE PRISON  
5905 Lake Earl Dr  
Crescent City CA 95532



PELICAN BAY  
P.S.U. UNIT B-2

CONFIDENTIAL  
LEGAL MAIL

**B**

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OFFICE OF THE CL  
UNITED STATES DIS  
COURT NORTHERN  
DISTRICT OF CALIF  
450 GOLDEN GATE  
AVENUE  
SAN FRANCISCO, CA